



CONTACT INFORMATION FOR PERMIT APPLICATION

Dear Applicant:

Please complete the following information. Your email address is required so you can be notified on the status of your plans.

First Name: (PRINT CLEARLY) Marcos Last Name: (PRINT CLEARLY) Alvarez

Cellular Number: 786-547-7109 Office/Home Number: 786-547-7109

EMAIL Address: Fvsecs@gmail.com

Comments:

Rework
Remove illegal garage conversion

If you are submitting a municipal plan, please provide the municipal process number(s) and ensure the municipal application is in the office set of plans _____

PLEASE INDICATE IF PLANS ARE

- ☐ GOV'T PROJECT/ DEPT _____ ☐ GREEN BLDG (NEW CONSTRUCTION ONLY)*
☐ AFFORDABLE/ WORKFORCE HOUSING* ☐ ECONOMIC SIGNIFICANCE*

(*Pursuant to Ordinance 99-140; Ordinance 05-115; and Ordinance 08-51. Project may have additional requirements.)

REQUESTED REVIEWS

- ☐ ALL ☐ BLDG ☐ DERM ☐ ELEC ☐ ENRG ☐ FIRE
☐ HCAP ☐ LANDSCAPING ☐ MECH ☐ PLUM ☐ PWKS ☐ PWCC
☐ ROOF ☐ SIGN ☐ STRU ☐ ZNPR ☐ WASD ☐ PWIF
☐ PERMIT BY AFFIDAVIT CHECK ☐ SHORT TERM EVENT AFFIDAVIT CHECK ☐ OPTIONAL PLAN REVIEW
☐ BLDG ☐ ELEC ☐ MECH ☐ PLUM ☐ STRU

-FOR OFFICE USE ONLY-

~~Miami-Dade County Department of Building and Planning Regulatory and Economic Resources~~ PLANS PROCESSING SPECIALIST:

0001149691 6/28/2016 7:03:10 AM Clerk Name: Bianca Arrival Time: 2:20

C.S. 06202016.pdf Process No(s): 12016129974

Examiner Date Time Stamp Dept Trade Stamp Name

David Cherry 6/22/2016 2:30:52 PM D ELEC Disapproved

- ☐ Re-Issue ☐ Plan Revision
☒ Rework ☐ Shop Drawing